Application or Docket Number

			101 240 106									
		CLAIMS A	S FILED - I			Column 2)		MALL ENT	ITY .	OR	OTHER T	
JS.	NATIONAL S	TAGE FEES	(Column	' ' '		, (18 min 2)	1 [RATE	FEE	ı	RATE	FEE
BASIC FEE				•			B	ASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE							│	XAM. FEE			EXAM. FEE	200
SEARCH FEE							- s	EARCH FEE		ļ	SEARCH FEE	400
FEE FOR EXTRA SPEC. PGS.			minu	ıs 100 =		/ 50 =	1	X \$ 125 =		•	X \$ 250 =	0
TOTAL CHARGEABLÉ CLAIMS				nus 20 =		6	1	X \$ 25 =		OR	X \$ 50 =	0
NDEPENDENT CLAIMS			—	inus 3 =		\overline{O}	┨┠	X \$ 100 =		OR	X \$ 200 =	6
		DENT CLAIM PR					1	+ \$ 180 =		OR	+ \$ 360 =	0
		in column 1 is		enter "()" in co	lumn 2	J L	TOTAL		OR	TOTAL	900
AMENDMENT A	Total Independent FIRST PRES	CLAIMS REMAINING AFTER AMENDMENT *	Minus Minus MULTIPLE DEP	PREVIO	BER OUSLY FOR	PRESENT EXTRA		X \$ 25 = X \$ 100 = + \$ 180 = TOTAL ADDIT. FEE	ADDI- TIONAL FEE	OR OR OR	X \$ 200 =	ADDI- TIONAL FEE
AMENDMENT B	Total	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGH NUM PREVI	BER	(Column 3) PRESENT EXTRA		RATE X \$ 25 =	ADDI- TIONAL FEE	OR	RATE X \$ 50 =	ADDI- TIONAL FEE
MEN	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDEN				CLAIM			+ \$ 180 =		OR		
*	If the "Highest N If the "Highest N	lumn 1 is less than t lumber Previously P lumber Previously P umber Previously Pa	ald For" IN THIS S ald For" IN THIS S	SPACE is les	ss than '2 ss than '3	20', enter "20". 3', enter "3".	nd in the	FEE e appropriate bo	x in column	OR	TOTAL ADDIT.	